



Infirmery Intake Form

Nursing Assessment Protocol

Use Progress Notes for Additional Documentation

Inmate Name: BRAINWATE, KEVIN Date: 10/10/04 Time: 0010
 Number: 315294 Date Of Birth: 9-27-62 Medications: see MAR
 Gender: M Facility: DCC Medications: see MAR
 Allergies: NKDA Appearance: ☒ No Distress ☐ Minimal Distress ☐ Acute Distress

SUBJECTIVE: Chief Complaint: rib pain, attempt to "hang" self

Symptoms: ☐ Delayed Verbal Response ☐ Delayed Motor Response ☐ Bleeding / Bruising Behind Ears
☐ Uncoordinated Movement ☐ Confusion ☐ Lack of Attention ☐ Memory Loss
☐ Vision Changes ☐ Loss of Balance ☐ Headaches ☐ Drowsiness
☐ Pain: Where: _____ Scale 1 2 3 4 5 ☐ Decreased LOC ☐ Seizures

OBJECTIVE:

Temp: _____ Pulse: 93 Resp: 18 B/P: 149/98 Pulse Ox: _____ WT: _____ Finger Stick: _____

☐ Evidence of trauma

Head: _____

Torso: ecchymosis on back

Extremities: _____

☐ Wounds

Head: open

Torso: wounds

Extremities: noted

☐ Deformities

Head: none

Torso: _____

Extremities: _____

Mark and Describe on Diagram

Diagram showing two human figures (Left and Right) with handwritten notes indicating areas of concern. The Left figure has a circled area on the back labeled 'ecchymosis'. The Right figure has a circled area on the head labeled 'open wound' and a circled area on the torso labeled 'wounds'. A legend on the right lists various types of trauma:

- A....Abrasion
- B....Bruise
- C....Raccoon's Eyes
- L....Laceration
- R....Rash
- O....Other:

ASSESSMENT:

☐ Critical - Immediate Referral Local Emergency Department

☒ Stable - may house in infirmary

☐ Other: _____

Nurse's Signature and Stamp:

Brenda Holwerda RN

Time: 10-10-04

Exh. I-1